

P. 03
RECEIVED
CENTRAL FAX CENTER

FEB 17 2004

APPLICATION DATA SHEET

Application Information

Application number:: 09/650,984
Filing Date:: 08/30/2000

Application Type:: Regular
Subject Matter:: Utility
Title:: TELECOMMUNICATIONS SYSTEM
Attorney Docket Number:: 1156a
Suggested Drawing Figure:: FIG. 1
Total Drawing Sheets:: 11

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship
Country:: USA
Given Name:: MARTIN
Middle Name:: JOSEPH
Family Name:: KAPLAN
City of Residence:: OLATHE
State or Providence of Residence:: KS
Country of Residence:: USA
Street of mailing address:: 10902 CEDAR NILES CIRCLE
City of mailing address:: OLATHE
State or Province of mailing address:: KS
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 66061

Applicant Authority Type:: Inventor
Primary Citizenship
Country:: USA
Given Name:: FRANK

OFFICIAL

Middle Name:: ANTHONY
 Family Name:: DENAP
 City of Residence:: OVERLAND PARK
 State or Providence of Residence:: KS
 Country of Residence:: USA
 Street of mailing address:: 10324 WALMER
 City of mailing address:: OVERLAND PARK
 State or Province of mailing address:: KS
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 66212

Applicant Authority Type:: Inventor
 Primary Citizenship
 Country:: USA
 Given Name:: JOHN
 Middle Name:: ARNDT
 Family Name:: STRAND
 Name Suffix:: III
 City of Residence:: LEAVENWORTH
 State or Providence of Residence:: KS
 Country of Residence:: USA
 Street of mailing address:: 1530 SOUTH 22ND STREET
 City of mailing address:: LEAVENWORTH
 State or Province of mailing address:: KS
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 66048

Applicant Authority Type:: Inventor
 Primary Citizenship
 Country:: USA
 Given Name:: WILLIAM

Middle Name::	LEE
Family Name::	EDWARDS
City of Residence::	OVERLAND PARK
State or Providence of Residence::	KS
Country of Residence::	USA
Street of mailing address::	10563 GILLETTE
City of mailing address::	OVERLAND PARK
State or Province of mailing address::	KS
Country of mailing address::	USA
Postal or Zip Code of mailing address::	66215
Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	BRYAN
Middle Name::	LEE
Family Name::	GORMAN
City of Residence::	MISSION
State or Providence of Residence::	KS
Country of Residence::	USA
Street of mailing address::	6526 WEST 49TH STREET
City of mailing address::	MISSION
State or Province of mailing address::	KS
Country of mailing address::	USA
Postal or Zip Code of mailing address::	66202
Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	TURKEY
Given Name::	MURAT
Family Name::	BOG

City of Residence:: KANSAS CITY
 State or Providence of Residence:: MO
 Country of Residence:: USA
 Street of mailing address:: 8646 CHESTNUT CIRCLE
 APARTMENT 1
 City of mailing address:: KANSAS CITY
 State or Province of mailing address:: MO
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 64131

Applicant Authority Type:: Inventor
 Primary Citizenship
 Country:: USA
 Given Name:: MICHAEL
 Middle Name:: THOMAS
 Family Name:: SWINK
 City of Residence:: LENEXA
 State or Providence of Residence:: KS
 Country of Residence:: USA
 Street of mailing address:: 7704 OAKVIEW LANE
 City of mailing address:: LENEXA
 State or Province of mailing address:: KS
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 66216

Applicant Authority Type:: Inventor
 Primary Citizenship
 Country:: USA
 Given Name:: HAROLD
 Middle Name:: WAYNE
 Family Name:: JOHNSON

City of Residence:: ROACH
 State or Providence of Residence:: MO
 Country of Residence:: USA
 Street of mailing address:: 1092 ALCORN HOLLOW ROAD
 City of mailing address:: ROACH
 State or Province of mailing address:: MO
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 65787

Correspondence Information

Correspondence Customer
 Number:: 28004
 Phone number:: (303) 938-9999 EXT. 22
 Fax Number:: (303) 938-9995
 E-Mail address:: SWEBB@DSOBLAW.COM

Representative Information

Representative Customer Number::	28004
---	--------------

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
THIS APPLICATION	Continuation of	08/826,641	04/04/1997

Assignee Information

Assignee name:: SPRINT COMMUNICATIONS
 COMPANY, L. P.